

PATIENT

Tucker Lackey

SPECIES

Feline

BREED

DLH

SEX

Male Neutered

AGE

8 years

WEIGHT

18lbs

INTERPRETED BY

Maggie Machen
Lamy, DVM
DACVIM (Cardiology)

IMAGING

PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Mass Veterinary
Specialty Services

REFERRING VET

Dr. Masloski

INVOICE

21474

DATE

10/12/21

PRESENTING CLINICAL SIGNS

History: Recheck echo. History normal cardiac structure and function with borderline LAE noted on prior echocardiogram. Currently: Tucker is doing well at home. He is Good appetite and activity level. CV/RESP: NSR, grade II/VI murmur noted best on sternum, PSS, lung fields clear, compressible thorax. BP: 160mmHg x 3.
-Current medications: Atopica 100mg/ml 0.3mls daily.
-Pertinent previous echo findings (3/31/20 MML): LA 1.4 cm; LA:Ao 1.4; IVS 0.48 cm; PW 0.44 cm.

ECHOCARDIOGRAM FINDINGS

2D, m-mode, color flow and Doppler imaging is available.
Left ventricle: The LV diameter is normal with adequate myocardial function. The LV wall thicknesses are borderline with a slight increase from previous. The endocardium is remodeled. The papillary muscles are mildly remodeled and hyperechoic.
Left atrium: The left atrium is borderline normal in dimension. No obvious spontaneous contrast or thrombi seen.
Mitral valve: The mitral valve is normal in structure and mobility. No obvious systolic anterior motion is seen.
Aortic valve/Aorta: The aortic valve is normal in morphology and mobility. Normal aortic outflow velocity; laminar flow. No aortic insufficiency.
Right ventricle: Normal right ventricular diameter and morphology indicating no overt evidence of pulmonary arterial hypertension.
Right atrium: The right atrium is normal in dimension.
Tricuspid valve: The tricuspid valve appears normal with no tricuspid regurgitation.
Pulmonic valve/Pulmonary artery: The pulmonic valve is normal in morphology and mobility. No pulmonic insufficiency. Normal RVOT velocity; laminar flow.
Pericardium/other: No pericardial or pleural effusion noted. No obvious cardiac masses.
Heart rhythm: ECG reveals a sinus rhythm with an average HR of 150bpm.

2-Dimensional Measurements

Ao diam (cm)	1.1
LA diam (cm)	1.3
LA:Ao (Swe)	1.3
IVS thickness (cm)	0.53
LVID diastole (cm)	1.6
PW thickness (cm)	0.56
LVID systole (cm)	0.5
FS (%)	70

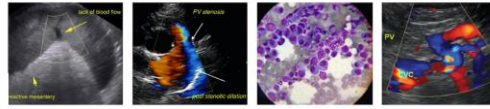
Doppler Measurements

PV Vmax (m/s)	0.53
AoV Vmax (m/s)	0.91
MR Vmax (m/s)	NA
TR Vmax (m/s)	NA
TR PG (mmHg)	NA

INTERPRETATION OF THE FINDINGS

Largely unchanged dimensions and function. The only progressive difference is the LV wall thickness is increased comparatively; however, remains within the grey zone of the normal range. Follow up is advised to assess for continued hypertrophy. The LA remains borderline enlarged without obvious change from prior and no additional issues are identified,

Prognosis remains open long-term prior to screening for progression.



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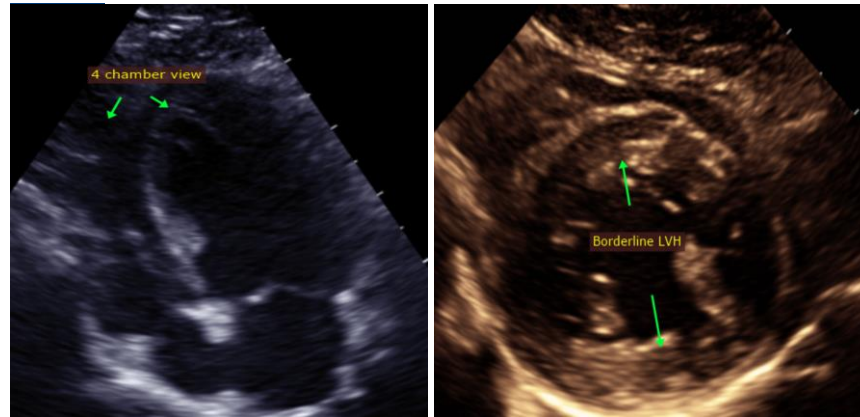
RECOMMENDATIONS

- Given these findings, no medications are indicated.
- No cardiac contraindication for general anesthesia. Mild IV fluid restriction is advised.
- Monitor for any clinical evidence of cardiac compromise, including respiratory changes and/or signs of a blood clot event (paralysis, neurologic changes, etc.).

PLAN

- Recommend recheck echocardiogram in 1 year, sooner if a murmur or gallop develop in the future, or clinical signs of cardiac compromise are noted.

IMAGES



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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. This report was generated using transcription software, and minor dictation errors may be present. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

IMAGING PERFORMED BY

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HOSPITAL NAME

Mass Veterinary
Specialty Services

Echocardiogram performed by: Pamela Harrigan, RDCS
Pet Animal Ultrasound Service (4paus.com)

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